

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION	R M		4/20
O.I.P.E. CLASSIFIER		8	5-15-01
FORMALITY REVIEW	FT	926	06-18-01
RESPONSE FORMALITY REVIEW			

## **INDEX OF CLAIMS**

✓ .....	Rejected	N .....	Non-elected
= .....	Allowed	I .....	Interference
— (Through numeral)...	Canceled	A .....	Appeal
÷ .....	Restricted	O .....	Objected

Final	Original	Date
1	✓	
2	✓	
3	✓	
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Claim	Date	
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If more than 150 claims or 10 actions  
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